Speech Pathology Australia

Have Your Say: NDIS Supports Lists

27/07/2025

Contact:
Dr Jennifer O'Connor
Chief, Policy and Advocacy

policy@speechpathologyaustralia.org.au

About Speech Pathology Australia

Speech Pathology Australia is the national peak body for speech pathologists in Australia, representing more than 16,000 members. Speech pathologists are university trained allied health professionals with expertise in the diagnosis, assessment, and treatment of communication and swallowing difficulties. The Association supports and regulates the ethical, clinical and professional standards of its members, as well as lobbying and advocating for access to services that benefit people with communication and swallowing difficulties.

Speech Pathology Australia

Table of Contents

Executive Summary

Urgent reform required to address harms from NDIS lists of supports and replacement supports process

The implementation of the NDIS Lists of Supports and the Replacement Supports process is undermining the rights of participants to communicate, eat, and drink safely and with dignity.

The system is failing participants in two critical areas: augmentative and alternative communication (AAC) and mealtime safety. Despite clear evidence of clinical need, essential equipment such as tablets, AAC apps, food processors, and aerators are being denied due to their placement on the Replacement Supports list or being excluded entirely. These decisions are being made even when the supports are clinically justified, lower-cost, and already allocated in a participant's plan.

At present participants' right to communication as per the United Nations Convention on the Rights for Persons with Disabilities (Articles 7, 19, 21 & 24) and access to assistive technology (Article 9) are being negatively impacted by the new NDIS Supports Lists.

NDIA staff and plan managers have taken an excessively conservative approach to funding approvals, creating unnecessary delays and barriers to accessing equipment that allows full participation. There are also increased safety risks associated with the denial of items that assist to prevent dehydration, aspiration pneumonia, choking, and death.

The replacement supports process is not fit for purpose, it is convoluted, inconsistently interpreted, and duplicative. It has created unnecessary delays and costs, particularly where a low-cost support has already been trialled and matched to the needs of the participant by a qualified speech pathologist. Speech pathologists are being forced to resubmit lengthy applications, only to have them denied, leaving participants unable to reapply for 12 months. In some cases, children are beginning school without the communication devices they need to engage with their peers and participate fully in their classrooms.

Speech Pathology Australia calls for the immediate removal of the Replacement Supports process and urgent revision of the Lists of Supports to reflect evidence-based, person-centred practice. Failure to act will continue to endanger lives, compromise the human rights of people with disability, and waste public funds on more expensive and less effective solutions. Reform is not optional, it is imperative.

Key recommendations

Recommendations

1. The List of Replacement Supports should be removed and these replacement supports should be placed on the Lists of Supports with an exemption for their prescription by an appropriate allied health professional e.g., qualified speech pathologist.
2. Household items for mealtime supports should be removed from the List of Supports that are Not NDIS Supports. There must be an exemption for food processors and aerators to be funded following prescription by a relevant allied health professional (such as a dietitian or speech pathologist).
3. Reclassify applications for communication as software under 'Communication and Information Equipment' on the List of Supports that are NDIS Supports.
4. There must be a specific exemption added to the specification of 'tablet devices' on the List of Supports that are Not NDIS Supports '*unless this device is to be used as a communication device solely by the participant as prescribed by a certified practising speech pathologist*'.
5. Clear guidance must be provided that augmentative and alternative communication systems are not a replacement for speech pathology support hours.

Speech Pathology Australia

Consequences of the current NDIS Supports Lists

The implementation of the NDIS Lists of Supports has been noted within the NDIS Reform Evaluation report[i] to have caused significant concern and anxiety for participants. They have also created difficulty and concern for speech pathologists, particularly regarding two main areas- augmentative and alternative communication (AAC) technology and mealtime supports. Urgent reform is needed regarding both of these areas to ensure the dignity, safety and participation of participants with communication and swallowing needs.

Feedback on the draft List of Supports that are NDIS Supports and List of Supports that are not NDIS Supports[ii] highlighted that electronic tablets and household items may be recommended to meet participant's needs related to their disability. Given that these items were on the List of Supports that are not NDIS supports, a solution was reached during the consultation process that they were placed on an additional List of Replacement Supports.

The replacement supports process has been disastrous for providers and participants, creating unnecessary additional administrative burden, increasing the cost of applying for the item and delaying or blocking the ability of participants to access vital supports.

Difficulties accessing supports to address swallowing needs

The 2019 'Scoping review of causes and contributors to deaths of people with disability in Australia[iii]' identified choking and respiratory disease as leading causes of death amongst people with disability. More than 80 per cent of choking incidents involved food items. People with disability with swallowing needs that affect their ability to eat and drink safely and effectively may require access to both modified foods and fluids in order to meet their nutritional and hydration needs. Therefore, it is critical that they are able to access both to reduce their risk of dehydration, lung infections (such as aspiration pneumonia), choking and potential death.

Whilst "assistive products for the preparation of food and drink" are on the list of NDIS supports, some household appliances that are used to modify foods and fluids for people with disability such as aerators and food processors are specifically excluded on the List of Supports that are not NDIS supports. Currently these items are excluded in all circumstances, even if required to support safe eating and swallowing and prevent choking and other negative outcomes listed above. The interpretation by NDIA staff and plan managers has erred on the side of financial caution, this has resulted in these critical items being denied in plans, and payments denied by plan managers, effectively blocking participants from accessing these supports.

Food processors and aerators, when clinically necessary due to a person's swallowing difficulties as a result of their disability are not optional lifestyle choices. These items are critical to the creation of safe, effective mealtimes to promote a person's wellbeing and independence. These items allow participants to change the texture of their food and fluids to eat and drink more safely in order to avoid serious medical complications such as dehydration, malnutrition, pneumonia and choking that may lead to their death.

However, despite extensive interactions with the NDIA and the Department of Social Services to inform them of these concerns in late 2024, this issue has not been resolved. There must be provisions within the Lists of Supports for household items such as food processors and

aerators for mealtime management to be approved when prescribed by a qualified speech pathologist or dietitian within their respective scope of practice.

Difficulties accessing technology for communication

Communication is a human right but access to necessary communication supports is being compromised by the current NDIS Lists and significant delays brought about by the Replacement Supports process.

Currently 'Communication and Information Equipment' is a category within the List of Supports that are NDIS Supports. Specifically, "products that facilitate a participant communicating by language, signs and symbols, receiving and producing messages, having conversations and using communication devices and techniques" are listed as NDIS supports (p.9), however tablets and apps for 'communication purposes' are not considered to be NDIS supports and listed as replacement supports. It is unclear as to why these disability-specific applications have been placed on the Replacement Support List when they meet the description under Communication and Information Equipment.

Speech Pathology Australia has received multiple reports that tablets for communication and AAC apps are being denied in plans despite successful trials and evidence provided by a qualified speech pathologist that the features of this communication system are most appropriate for this participant. This includes instances where there is already allocated funding for assistive technology, and when additional funds have been requested. Instead, the participant must apply for a different form of AAC system, often one that is more expensive and may have already been ruled out as a suitable option. This reapplication process comes with a significant time burden and financial cost due to the need for reassessment, trial of multiple other systems and then provision of additional reports and a further application.

It is critical that the expertise of qualified speech pathologists is recognised, taking in to account the preferences of the participant, family and other communication partners. Research into AAC abandonment has indicated that professional support and acceptance of the communication option by the family contributes to its use or abandonment[iv].

Tablet based communication systems may be the most appropriate option for some participants due to their low weight and easy to use interfaces, and may be more willingly accepted by their family and communication partners. Additionally, there is a significant cost difference between a tablet-based communication device that is less than $900 and a specialised communication device that is $8000. Participants should not be penalised for their device preferences, particularly when it is a more cost effective and accessible option.

Despite documentation that a communication app alone should be funded, due to concerns regarding payment compliance, plan managers have taken a very conservative approach, which has resulted in communication apps having to go through the Replacement Supports process, despite not being on the List of Supports that are Not NDIS Supports. This then creates risk for the participant that if this application is unsuccessful, the participant is not able to apply again for 12 months, which appears punitive for participants trying to access supports that are lower cost.

Case study[1]:

Ali is in preschool and has a disability which affects his ability to produce functional speech. Ali has been trialling a tablet device with a communication app in sessions with his speech pathologist for several months. He has successfully used the app in a range of contexts to communicate with his family. At his plan review in 2024, funds were placed in his plan to allow the purchase of his own tablet and the communication app prior to beginning school in 2025. The family put in the request for funds from their plan manager in October but received a rejection from their plan manager that the tablet is no longer considered a NDIS support. Despite advocacy from both the family and speech pathologist, the plan manager would not release the funds without permission from the NDIA in writing. The early childhood partner could not confirm that the tablet was allowed to be purchased and told the speech pathologist to put in a replacement supports application. The speech pathologist spent another 2 hours writing a replacement supports application, specifying that funds were already allocated for a communication device in Ali's plan, and the results of the feature matching process and successful trial. The application was rejected and the family informed they are unable to reapply for the tablet and communication app for 12 months. Ali's family is devastated that he has to start school without his communication system.

Difficulties with the replacement supports process

Concerns that the replacement supports process would add complexity and administrative burden to an already difficult system were raised within the 2024 consultation on the NDIS Supports Lists[v]. These concerns have been borne out in practice since the implementation of the process in October 2024.

The replacement supports process must be dissolved as it is not fit for purpose and results in a risk of harm and opportunity cost to participants. As outlined earlier within this submission, there should be specific exemptions made for equipment that has been prescribed by a qualified speech pathologist and determined to be the most suitable option for the participant.

The replacement supports process has caused extensive confusion, with information regarding which supports are allowed if recommended by an allied health provider published in multiple places on the NDIS website[2]. Speech Pathology Australia had to provide guidance to members in the absence of clear guidance from the NDIA regarding the sequence of completing the replacement supports process.

The process itself is also very convoluted, with issues being raised that it is difficult at times to find an option that a lower cost item would replace, for example with blenders. There is not a disability specific food processor, these items are technically household appliances, therefore there is not an item to replace, and some participants may still require the assistance of a support worker in meal preparation.

[1] This is a hypothetical example, based upon multiple real world case studies reported to SPA after October 3 2024.

[2] E.g. the NDIS lists of supports on What does NDIS fund? | NDIS (latest update 5 December 2024) vs Smart devices - tablets | NDIS (latest update 14 May 2025)

Our members have reported instances where upon completion of the replacement supports process, the funds for the requested equipment have not been provided, rather funds have only been allocated for further equipment trial. This ignores the expertise of the speech pathologist, who has already undertaken a feature matching process and/or trialled equipment options and further delays the provision of the equipment.

There is now a backlog of applications for critical supports for people with communication and/or swallowing needs. This is a risk for participants who are non-speaking to not have any communication method and for those with swallowing needs to compromise their own safety by either restricting their oral intake or attempting to eat and drink non-modified textures.

It has also been reported that due to communication apps and tablets for communication being classified as 'Replacement Supports' the interpretation by NDIA staff is that these systems will replace speech pathology supports. This is grossly inappropriate. It is not sufficient to merely provide a system or to focus only on the design or provision of the tools for communication, there must also be supports to teach the participant and their caregivers, families and other communication partners how to use the system. It is also critical that responsive episodic speech pathology support is provided to manage any difficulties and continue to extend the features of the system to meet the changing communication needs of the participant as their language capability grows.

Clarity must be provided to NDIA staff and plan managers that the necessary hours of therapy support from a qualified speech pathologist to support the participant in relation to their AAC technology are not required to be sacrificed in order to fund the assistive technology itself.

References

[i] National Disability Insurance Agency, 2025. *NDIS supports, funding amounts and periods – Summary Report 1* (June 2025). Data Research NDIS. [pdf] Available at: https://dataresearch.ndis.gov.au/media/4345/download?attachment=

[ii] Department of Social Services, 2024. *What have we heard? Summary – Section 10: Public consultation on draft list of National Disability Insurance Scheme supports* (What Have We Heard – NDIS support lists Attachment A) [pdf]. Canberra: Department of Social Services. Available at: https://engage.dss.gov.au/wp-content/uploads/2024/10/2024-10-01-what-have-we-heard-summary-section-10-public-consultation.pdf

Speech Pathology Australia, 2024. Letter re: NDIS Supports Bill. Available at: https://www.speechpathologyaustralia.org.au/resource?resource=970

[iii] NDIS Quality and Safeguards Commission, 2024. *Scoping review of causes and contributors to deaths of people with disability in Australia* (Final report, amended title) [pdf]. Canberra: NDIS Quality and Safeguards Commission. Available at: https://www.ndiscommission.gov.au/sites/default/files/2024-09/findingsreviewdeaths-people-disabilityaustraliafinalwith-amended-titleword-23.pdf

[iv] American Speech-Language-Hearing Association, 2025. *Augmentative and Alternative Communication (AAC)*. ASHA Practice Portal [online]. Rockville, MD: American Speech-Language-Hearing Association. Available at: https://www.asha.org/Practice-Portal/Professional-Issues/Augmentative-and-Alternative-Communication/

Moorcroft, A., Scarinci, N. & Meyer, C., 2019. Speech pathologist perspectives on the acceptance versus rejection or abandonment of AAC systems for children with complex communication needs. *Augmentative and Alternative Communication*, 35(3), pp.193–204. Available at: https://doi.org/10.1080/07434618.2019.1609577

[v] Department of Social Services, 2024. *What have we heard? Summary – Section 10: Public consultation on draft list of National Disability Insurance Scheme supports* (What Have We Heard – NDIS support lists Attachment A) [pdf]. Canberra: Department of Social Services. Available at: https://engage.dss.gov.au/wp-content/uploads/2024/10/2024-10-01-what-have-we-heard-summary-section-10-public-consultation.pdf